Kentucky Department for Public Health Weekly Influenza Surveillance Report Morbidity and Mortality Weekly Report (MMWR) Week 1 December 31, 2017– January 6, 2018



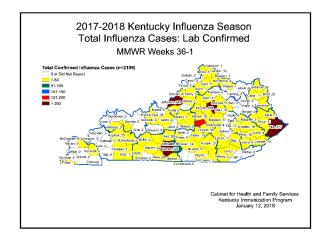
Current Influenza Activity Level: Widespread for Fourth Consecutive Week

[†]**Widespread**: Outbreaks of influenza or increases in ILI and recent laboratory confirmed influenza in at least half the regions of the state with recent laboratory evidence of influenza in the state.

*Confirmed: Influenza laboratory Confirmed Cases are defined by positive molecular virus (RT-PCR) or Virus Culture test results. Those positive test results are reportable in Kentucky. (Positive results for Rapid Influenza Diagnostic Tests are not included in this report)

Activity Level Range: Sporadic Local Regional Widespread

Update for week 1:		Update Total for weeks 36-1:			
Lab Confirmed Influenza:	698 Cases	Lab Confirmed Total:	2109 Cases		
Number of Regions with Long Term Care Facility Outbreaks:	12 of 17 Regions	Total Number of Long Term Care Facility Outbreaks:	39 Outbreaks		
Number of Regions with Confirmed Flu Cases:	15 of 17 Regions	Total Number of Regions with Confirmed Flu Cases:	17 of 17 Regions		
Deaths Reported:	2 (under 18 years) 10 (18 years & older)	Total Deaths Reported:	2 (under 18 years) 22 (18 years & older)		
Number of Regions with Increased ILI Activity:	17 of 17 Regions				
Number of Regions with Increased Influenza Activity (see page 3):	17 of 17 Regions				



Kentucky Department for Public Health Weekly Influenza Surveillance Report MMWR Week 1: December 31, 2017– January 6, 2018

Fig 1: Laboratory Confirmed Cases by Age

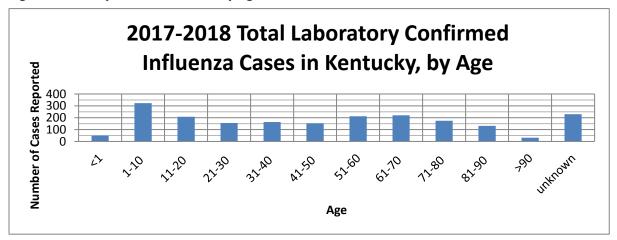


Fig 2: Laboratory Confirmed Cases by Influenza Virus Types

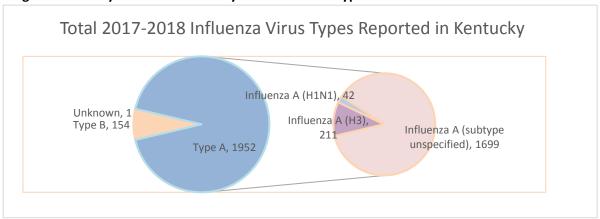
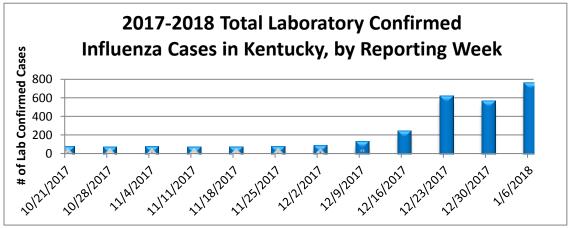


Fig 3: 2017-2018 Total Laboratory Confirmed Influenza Cases in Kentucky, by Reporting Week



^{*}Confirmed: Influenza laboratory Confirmed Cases are defined by positive RT-PCR or Virus Culture test results

Kentucky Department for Public Health Weekly Influenza Surveillance Report MMWR Week 1: December 31, 2017 – January 6, 2018

Influenza Activity Determination Table								
			Category 1	Category 2	Category 3	Combined 1 or 2 plus 3		
Regions	Number ILI Net Surveillance Sites Reporting / Total Enrolled Sites	Deaths Reported	Influenza Outbreaks Reported	Increased ILI Activity Reported	Laboratory Confirmed Influenza Reported	Include Region in Weekly Report for Increased Influenza Activity		
Barren River	1/6	3 (1 Ped)	1	Υ	107	Υ		
Big Sandy	0/1		1	Υ	107	Υ		
Bluegrass Region	2/8		2	Υ	127	Υ		
Buffalo Trace / Gateway	0/3			Υ	3	Υ		
Capital Region	5/13		2	Υ	8	Υ		
Cumberland Valley	0/5			Υ	10	Υ		
FIVCO	1/3		1	Υ	23	Υ		
Green River	0/4	1	2	Υ		Υ		
Kentucky River	0/1	1		Υ	57	Υ		
Lake Cumberland	0/1		2	Υ	34	Υ		
Lexington - Fayette	3/7	2		Υ	77	Υ		
Lincoln Trail	1/6			Υ	35	Υ		
Louisville-Metro	3/20	1	3	Υ	57	Υ		
North Central	2/2	3	2	Y	8	Υ		
Northern KY	3/11		5	Y	5	Υ		
Pennyrile	0/2	1 Ped	1	Y	40	Υ		
Purchase	0/3		1	Υ	1	Υ		
**Total:	21/94	12	12/17 regions	17/17 regions	15/17 regions	17/17 regions		

^{**}Total number of regions reporting category of activity not total number of influenza cases

Kentucky National Electronic Disease Surveillance System (NEDSS) and U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) Data. Department for Public Health, Cabinet for Health and Family Services, Frankfort, Kentucky, [December 31, 2017 – January 6, 2018].



National Data 2017-2018 Influenza Season Week 52 ending December 30, 2017

All data are preliminary and may change as more reports are received.

*Week 1 will be available January 18th and will be attached on the next report.

Synopsis:

During week 52 (December 24-30, 2017), influenza activity increased sharply in the United States.

- <u>Viral Surveillance</u>: The most frequently identified influenza virus subtype reported by public health laboratories during week 52 was influenza A(H3). The percentage of respiratory specimens testing positive for influenza in clinical laboratories increased.
- Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.
- o <u>Influenza-associated Pediatric Deaths:</u> One influenza-associated pediatric death was reported.
- Influenza-associated Hospitalizations: A cumulative rate of 13.7 laboratory-confirmed influenzaassociated hospitalizations per 100,000 population was reported.
- Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 5.8%, which is above the national baseline of 2.2%. All 10 regions reported ILI at or above region-specific baseline levels. New York City and 26 states experienced high ILI activity; Puerto Rico and nine states experienced moderate ILI activity; the District of Columbia and six states experienced low ILI activity; and nine states experienced minimal ILI activity.
- Geographic Spread of Influenza: The geographic spread of influenza in 46 states was reported as widespread; four states reported regional activity; the District of Columbia reported local activity; and Guam, Puerto Rico, and the U.S. Virgin Islands did not report.

Weekly U.S. Influenza Surveillance Report. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/weekly/index.htm, Retrieved: 1/10/2018.